BILL HISTORY FOR SENATE BILL 136 (LRB -2596)

An Act to amend 40.51 (8), 40.51 (8m), 60.23 (25), 66.184, 111.91 (2) (n), 120.13 (2) (g), 185.981 (4t) and 185.983 (1) (intro.); and to create 609.88 and 632.895 (14) of the statutes; relating to: requiring insurance coverage of certain immunizations for children. (FE)

1999	
04–28. S.	Introduced by Senators Grobschmidt, Clausing, Moen, Rosenzweig, Burke, Darling, Wirch, Robson, Plache and Risser; cosponsored by Representatives Huebsch, Carpenter, Sinicki, Ryba, Bock, Staskunas, Musser, Gronemus, Hahn, Boyle, Black, Young, Pocan, Miller, Plale and Wasserman.
04–28. S.	Read first time and referred to committee on Insurance, Tourism, Transportation and Corrections 130
05-20. S.	Fiscal estimate received.
05–20. S.	Fiscal estimate received.
10-06. S.	Public hearing held.
10-06. S.	Executive action taken.
10–20. S.	Report introduction and adoption of Scnatc amendment 1 recommended by committee on Insurance, Tourism, Transportation and Corrections, Ayes 7, Noes 0 (LRB a0737)
10–20. S.	Report passage as amended recommended by committee on Insurance, Tourism, Transportation and Corrections, Ayes 7, Noes 0
10-20. S.	Available for scheduling.
11-09. S.	Read a second time
11-09. S.	Senate amendment 1 adopted
11-09. S.	Ordered to a third reading
11-09. S.	Rules suspended
11–09. S.	Senator Rude added as a coauthor
11–09. S.	Senator Roessler added as a coauthor
11–09. S.	Read a third time and passed
11-09. S.	Ordered immediately messaged
11-10. A.	Received from Senate
11-10. A.	Read first time and referred to committee on Public Health
2000	-
	Public hearing held.
02-02. A	RB correction
03–02. A.	Executive action taken.
	Report concurrence recommended by committee on Public Health, Ayes 8, Noes 0
03-09. A.	Referred to committee on Rules
	Placed on calendar 3–21–2000 by committee on Rules.
	Assembly amendment 1 offered by Representatives Huebsch and Ladwig (LRB a1862)
	Read a second time
	Assembly amendment 1 withdrawn and returned to author
	Assembly amendment 2 offered by Representative Duff (LRB a1928)
	Assembly amendment 2 laid on table, Ayes 84, Noes 13
	Ordered to a third reading
	Rules suspended
	Read a third time and concurred in, Ayes 92, Noes 5
	Representative Morris–Tatum added as a cosponsor
03–21. A.	Ordered immediately messaged
03_23_5	Received from Assembly concurred in

1999 ENROLLED BILL

99en_SB-<u>13</u>6

ADOPTED DOCUMENTS:
Orig Engr
Amendments to above (if none, write "NONE"):
Corrections - show date (if none, write "NONE"): 2-02-2000
Topic Pegenino insurance Corerage of Certain innunizations of forchildren
3/3/00 Phillip Drafter Date Enrolling Drafter

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State of Misconsin 1999-2000 LEGISLATURE

CORRECTIONS IN:

1999 SENATE BILL 136

Prepared by the Legislative Reference Burcau (January 28, 2000)

1. Page 5, line 14: delete "act first applies to" and substitute "act".

April 28, 1999 — Introduced by Senators Grobschmidt, Clausing, Moen, Rosenzweig, Burke, Darling, Wirch, Robson, Plache and Risser, cosponsored by Representatives Huebsch, Carpenter, Sinicki, Ryba, Bock, Staskunas, Musser, Gronemus, Hahn, Boyle, Black, Young, Pocan, Miller, Plale and Wasserman. Referred to Committee on Insurance, Tourism, Transportation and Corrections.

AN ACT to amend 40.51 (8), 40.51 (8m), 60.23 (25), 66.184, 111.91 (2) (n), 120.13

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- (2) (g), 185.981 (4t) and 185.983 (1) (intro.); and to create 609.88 and 632.895
- (14) of the statutes; **relating to:** requiring insurance coverage of certain immunizations for children.

Analysis by the Legislative Reference Bureau

This bill requires every health insurance policy (called "disability insurance policy" in the statutes), including managed care plans, health care plans offered by the state, and every self—insured health plan of the state or a county, city, town, village or school district, to provide coverage of appropriate and necessary immunizations, specified in the bill, from birth to age two, for a dependent child of the insured if the policy or plan covers a dependent of the insured. (Under current law, health insurance policies are required to cover a newly born child of the insured, even if the policy did not provide coverage for dependents at the time of the birth.) Generally, coverage of the specified immunizations may not be subject to any deductibles, coinsurance or copayments under the policy or plan. Specifically excluded from this coverage requirement are health insurance policies that cover only hospital and surgical charges or only certain specified diseases, health care plans offered by limited service health organizations or by preferred provider plans that are not managed care plans, medicare replacement or supplement policies and long—term care insurance policies.

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For further information see the **state and local** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 40.51 (8) of the statutes is amended to read: 1 40.51 (8) Every health care coverage plan offered by the state under sub. (6) 2 shall comply with ss. 631.89, 631.90, 631.93 (2), 632.72 (2), 632.746 (1) to (8) and (10), 3 632.747, 632.748, 632.85, 632.853, 632.855, 632.87 (3) to (5), 632.895 (5m) and (8) to 4 (13) (14) and 632.896. 5 SECTION 2. 40.51 (8m) of the statutes is amended to read: 6 40.51 (8m) Every health care coverage plan offered by the group insurance 7 board under sub. (7) shall comply with ss. 632.746 (1) to (8) and (10), 632.747, 8 632.748, 632.85, 632.853, 632.855 and 632.895 (11) to (13) (14). 9 **SECTION 3.** 60.23 (25) of the statutes is amended to read: 10 60.23 (25) Self-insured health plans. Provide health care benefits to its $\cdot 11$ officers and employes on a self-insured basis if the self-insured plan complies with **12** ss. 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.85, 13 632.853, 632.855, 632.87 (4) and (5), 632.895 (9) and (11) to (13) (14) and 632.896. 14 **SECTION 4.** 66.184 of the statutes is amended to read: 15 66.184 Self-insured health plans. If a city, including a 1st class city, or a 16 village provides health care benefits under its home rule power, or if a town provides 17 health care benefits, to its officers and employes on a self-insured basis, the 18 self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 19

632.746(10)(a)2. and (b) 2., 632.747(3), 632.85, 632.853, 632.855, 632.87(4) and (5),

632.895 (9) to (13) (14), 632.896, 767.25 (4m) (d), 767.51 (3m) (d) and 767.62 (4) (b) 1 2 4. **SECTION 5.** 111.91 (2) (n) of the statutes is amended to read: 3 111.91 (2) (n) The provision to employes of the health insurance coverage 4 required under s. 632.895 (11) to (13) (14). 5 **SECTION 6.** 120.13 (2) (g) of the statutes is amended to read: 6 120.13 (2) (g) Every self-insured plan under par. (b) shall comply with ss. 7 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 8 632.85, 632.853, 632.855, 632.87 (4) and (5), 632.895 (9) to (13) (14), 632.896, 767.25 9 (4m) (d), 767.51 (3m) (d) and 767.62 (4) (b) 4. 10 SECTION 7. 185.981 (4t) of the statutes is amended to read: 11 185.981 (4t) A sickness care plan operated by a cooperative association is 12 $subject to ss.\ 252.14, 631.89, 632.72\ (2), 632.745\ to\ 632.749, 632.85, 632.853, 632.855,$ 13 632.87 (2m), (3), (4) and (5), 632.895 (10) to (13) (14) and 632.897 (10) and chs. 149 14 and 155. 15 **SECTION 8.** 185.983 (1) (intro.) of the statutes is amended to read: 16 185.983 (1) (intro.) Every such voluntary nonprofit sickness care plan shall be 17 exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41, 18 601.42, 601.43, 601.44, 601.45, 611.67, 619.04, 628.34 (10), 631.89, 631.93, 632.72 19 (2), 632.745 to 632.749, 632.775, 632.79, 632.795, 632.85, 632.853, 632.855, 632.87 20 (2m), (3), (4) and (5), 632.895 (5) and (9) to (13) (14), 632.896 and 632.897 (10) and 21 chs. 609, 630, 635, 645 and 646, but the sponsoring association shall: 22 **SECTION 9.** 609.88 of the statutes is created to read: 23 609.88 Coverage of immunizations. Managed care plans are subject to s. 24632.895 (14). 25

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1	SECTION 10. 632.895 (14) of the statutes is created to read:
2	632.895 (14) COVERAGE OF IMMUNIZATIONS. (a) In this subsection:
3	1. "Appropriate and necessary immunizations" means the administration of
4	vaccine that meets the standards approved by the U.S. public health service for such
5	biological products against at least all of the following:
6	a. Diphtheria.
7	b. Pertussis.
8	c. Tetanus.
9	c. Tetanus. d. Polio.
10	e. Measles.
11	f. Mumps.
12	g. Rubella.
13	h. Hemophilus influenza B.
14	i. Hepatitis B.
15	2. "Dependent" means a spouse, an unmarried child under the age of 19 years,
16	an unmarried child who is a full–time student under the age of 21 years and who is
17	financially dependent upon the parent, or an unmarried child of any age who is
18	medically certified as disabled and who is dependent upon the parent.
19	(b) Except as provided in par. (d), every disability insurance policy, and every
20	self–insured health plan of the state or a county, city, town, village or school district,
21	that provides coverage for a dependent of the insured shall provide coverage of
22	appropriate and necessary immunizations, from birth to the age of years, for a
23	dependent who is a child of the insured.
24	(c) The coverage required under par. (b) may not be subject to any deductibles,

copayments or coinsurance under the policy or plan. This paragraph applies to a

managed care plan, as defined in s. 609.01 (3c), only with respect to appropriate and
necessary immunizations provided by providers participating, as defined in s. 609.01
(3m), in the plan.
(d) This subsection does not apply to any of the following:
1. A disability insurance policy that covers only certain specified diseases.
2. A disability insurance policy that covers only hospital and surgical charges.
3. A health care plan offered by a limited service health organization, as defined
in s. $609.01(3)$, or by a preferred provider plan, as defined in s. $609.01(4)$, that is not
a managed care plan, as defined in s. 609.01 (3c).
4. A long-term care insurance policy, as defined in s. 600.03 (28g).
5. A medicare replacement policy, as defined in s. 600.03 (28p).
6. A medicare supplement policy, as defined in s. 600.03 (28r).
SECTION 11. Initial applicability.
(1) This act first applies to first applies to all of the following:
(a) Except as provided in paragraphs (b) and (c), disability insurance policies
that are issued or renewed, and self-insured health plans that are established,
extended, modified or renewed, on the effective date of this paragraph.
(b) Disability insurance policies covering employes who are affected by a
collective bargaining agreement containing provisions inconsistent with this act
that are issued or renewed on the earlier of the following:
1. The day on which the collective bargaining agreement expires.
2. The day on which the collective bargaining agreement is extended, modified
or renewed.

(c) Self-insured health plans covering employes who are affected by a collective
bargaining agreement containing provisions inconsistent with this act that are
established, extended, modified or renewed on the earlier of the following:
1. The day on which the collective bargaining agreement expires.
2. The day on which the collective bargaining agreement is extended, modified
or renewed.
SECTION 12. Effective date.
(1) This act takes effect on the first day of the 6th month beginning after
publication.

(END)

SENATE AMENDMENT 1, TO 1999 SENATE BILL 136

October 20, 1999 – Offered by Committee on Insurance, Tourism, Transportation and Corrections.

